

**ADULT DENTAL PLAN  
General Dentist**

High Freq. Code	Code	Description	100%	20%	30%	40%	50%
<b>DIAGNOSTIC SECTION</b>							
<b>EXAMINATIONS</b>							
	85501	Limited oral (new patient) .....	42.05	8.41	12.62	16.82	21.03
	85503	Emergency (Remarks Code required) .....	50.93	10.19	15.28	20.37	25.47
<b>RADIOGRAPHS</b>							
<b>Bitewing</b>							
	85507	- One (see Preamble) .....	20.23	4.05	6.07	8.09	10.12
	85509	- Two (see Preamble) .....	26.51	5.30	7.95	10.60	13.26
<b>Periapical</b>							
	85511	- One (Remarks Code required) .....	20.23	4.05	6.07	8.09	10.12
	85512	- Two (Remarks Code required) .....	26.51	5.30	7.95	10.60	13.26
<b>Panoramic</b>							
	85513	One ( <b>Restricted to Oral Surgeon</b> ) (Remarks Code required)					
<b>RESTORATIVE SECTION</b>							
	85514	Removal of carious lesion or existing restoration and the placement of sedative/protective dressing when not done the same day or within 42 days of the subsequent final restoration. ....	93.93	18.79	28.18	37.57	46.97
<b>DENTAL RESTORATIONS</b>							
<b>Primary Canine and Molar Teeth</b>							
	85515	- One surface .....	88.93	17.79	26.68	35.57	44.47
	85517	- Two surfaces .....	130.23	26.05	39.07	52.09	65.12
	85519	- Three surfaces .....	151.52	30.30	45.46	60.61	75.76
	85521	- Four surfaces .....	183.67	36.73	55.10	73.47	91.84
<b>Permanent Anteriors and Premolars</b>							
	85523	- One surface .....	117.05	23.41	35.12	46.82	58.53
	85525	- Two surfaces .....	156.68	31.34	47.00	62.67	78.34
	85527	- Three surfaces .....	180.95	36.19	54.29	72.38	90.48
	85529	- Four surfaces .....	234.41	46.88	70.32	93.76	117.21
<b>Permanent Molars – Amalgam Fillings</b>							
	85531	- One surface .....	97.07	19.41	29.12	38.83	48.54
	85533	- Two surfaces .....	133.34	26.67	40.00	53.34	66.67
	85535	- Three surfaces .....	177.90	35.58	53.37	71.16	88.95
	85537	- Four surfaces .....	210.87	42.17	63.26	84.35	105.44
	85539	- Five surfaces .....	247.54	49.51	74.26	99.02	123.77

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<b>Permanent Molars – Tooth Colored Bonded Fillings</b>							
	85541	- One surface .....	134.89	26.98	40.47	53.96	67.45
	85543	- Two surfaces .....	190.37	38.07	57.11	76.15	95.19
	85545	- Three surfaces .....	237.36	47.47	71.21	94.94	118.68
	85547	- Four surfaces .....	287.30	57.46	86.19	114.92	143.65
	85549	- Five surfaces .....	311.13	66.23	99.34	132.45	165.57
<b>Retentive Pins</b>							
	85551	- One pin .....	24.64	4.93	7.39	9.86	12.32
	85553	- Two or more pins .....	38.91	7.78	11.67	15.56	19.46
<b>ORAL SURGERY SECTION</b>							
<b>REMOVALS</b>							
	85555	Single tooth removal, uncomplicated .....	106.45	21.29	31.94	42.58	53.23
	85557	Each additional tooth removed in the same quadrant .....	76.04	15.21	22.81	30.42	38.02
	85559	Odontectomy, surgical approach, requiring surgical flap. removal of bone and/or sectioning of tooth. (Except for third molar impactions, in which case the Surgical Dental Schedule should be used, noting the applicable restrictions). .....	207.59	41.52	62.28	83.04	103.80

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<b>PROSTHODONTICS REMOVABLE</b>							
<b>DENTIST:</b>							
<b>Complete Dentures, Standard</b>							
85561		Denture: complete, upper Including laboratory fees .....	750.00	150.00	225.00	300.00	375.00
85562		Denture: complete, lower Including laboratory fees .....	750.00	150.00	225.00	300.00	375.00
85564		Denture complete reline, upper Including laboratory fees ..	211.00	42.20	63.30	84.40	105.50
85565		Denture complete reline, lower Including laboratory fees ..	211.00	42.20	63.30	84.40	105.50
85566		Denture immediate post extraction Insertion including laboratory fees .....	532.00	106.40	159.60	212.80	266.00
85567		Repairs - \$42/15 minutes to maximum of \$128 including laboratory fees – per denture					
<b>Partial Dentures</b>							
85568		Denture: partial – upper Including laboratory fees .....	503.00	100.60	150.90	201.20	251.50
85569		Denture: partial – lower Including laboratory fees .....	503.00	100.60	150.90	201.20	251.50
85570		Denture: partial reline – upper Including laboratory fees ..	211.00	42.20	63.30	84.40	105.50
85571		Denture: partial reline – lower Including laboratory fees ...	211.00	42.20	63.30	84.40	105.50
85572		Repairs - \$42/15 minutes to maximum of \$128 including laboratory fees – per denture					
<b>DENTURIST</b>							
<b>Complete Dentures, Standard</b>							
85573		Denture: complete, upper Including laboratory fees .....	750.00	150.00	225.00	300.00	375.00
85574		Denture: complete, lower Including laboratory fees .....	750.00	150.00	225.00	300.00	375.00
85576		Denture: complete, reline, upper Including laboratory fees	211.00	42.20	63.30	84.40	105.50
85577		Denture complete, reline – lower Including laboratory fees	211.00	42.20	63.30	84.40	105.50
85578		Repairs - \$42/15 minutes to maximum of \$98 including laboratory fees					
<b>Partial Dentures</b>							
85579		Denture: partial – upper Including laboratory fees .....	503.00	100.60	150.90	201.20	251.50
85580		Denture: partial – lower Including laboratory fees .....	503.00	100.60	150.90	201.20	251.50
85581		Denture: partial reline – upper Including laboratory fees ..	211.00	42.20	63.30	84.40	105.50
85582		Denture: partial reline – lower Including laboratory fees ...	211.00	42.20	63.30	84.40	105.50
85583		Repairs - \$42/15 minutes to maximum of \$98 including laboratory fees.					